Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	<u>-</u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	art 1: Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
1.	Your full name							
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Melissa First name Ann Middle name Stevens Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)					
	meeting with the trustee.	(2,72,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,7,	(, , , , , ,					
2.	All other names you have used in the last 8 years							
	Include your married or maiden names.							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3484						

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 2 of 54

Case number (if known)

Debtor 1 Melissa Ann Stevens

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and Employer Identification Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 6011 Baker Road **Athens, OH 45701** Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Athens** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 3 of 54

Case number (if known) Debtor 1 Melissa Ann Stevens

•ar	t 2: Tell the Court About	Your B	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> page 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box.	
	choosing to file under	□с	hapter 7				
		□с	hapter 11				
		□с	hapter 12				
		■ C	hapter 13				
3.	How you will pay the fee	•	about how yo	u may pay. Typio attorney is subm	cally, if you are paying the fee y	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with	y
					Illments. If you choose this opti (Official Form 103A).	on, sign and attach the Application for Individuals to Pay	
			I request that but is not requapplies to you	t my fee be wai uired to, waive yo ur family size and	wed (You may request this option fee, and may do so only if you are unable to pay the fee it	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.	at
) .	Have you filed for bankruptcy within the	■ No					
	last 8 years?	☐ Ye			144		
			District			Case number	_
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No)				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	_
			District		When	Case number, if known	
11.	Do you rent your	■ No	Go to l	ine 12.			
	residence?	□ Ye		ur landlord obtai	ned an eviction judgment agains	st you and do you want to stay in your residence?	
			,s.	No. Go to line 1			
			_		ial Statement About an Eviction	Judgment Against You (Form 101A) and file it with this	

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

Debtor 1	Melissa Ann Stevens	Document	Case number (if known)	

Par	Report About Any Bu	sinesses	You Owr	as a Sole Proprietor					
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.					
		☐ Yes.	Name	e and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any					
	If you have more than one sole proprietorship, use a		Numb	per, Street, City, State & ZIP Code					
	separate sheet and attach it to this petition.		Chec	k the appropriate box to describe your business:					
	·			Health Care Business (as defined in 11 U.S.C. § 101(27A))					
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))						
				Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the above					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur in 11 U.S.C. 1116(1)(B).							
	For a definition of small	No.	I am i	not filing under Chapter 11.					
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
		☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.					
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any Property That Needs Immediate Attention					
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety?	■ No.	What is	the hazard?	_				
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code					
				Hambor, Stroot, Stay, State & Esp Sode					

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 5 of 54

Debtor 1 Melissa Ann Stevens

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 6 of 54

Case number (if known) Debtor 1 Melissa Ann Stevens Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5**0,001-100,000 **5001-10,000 50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 **200-999** 19. How much do vou **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you ■ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Melissa Ann Stevens Signature of Debtor 2 Melissa Ann Stevens Signature of Debtor 1 Executed on Executed on May 30, 2017 MM / DD / YYYY MM / DD / YYYY

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 7 of 54

Debtor 1 Melissa Ann Stevens Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Adam J	J. Baker	Date	May 30, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Adam J. B	aker		
Printed name			
Adam Bak	er Attorney & Counselor-at-	·Law, LLC	
Firm name	-		
8 North Co	ourt Street, Suite 212		
Athens, O	H 45701		
	City, State & ZIP Code		
Contact phone	740-592-9043	Email address	adambakerlaw@frontier.com
0059130			
Bar number & S	tate		

	243C 2.11-DK-3343	Docum			Desc Main
Fill in this	information to identify yo	ur case:			
Debtor 1	Melissa Ann St	evens			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
Case numb	tes Bankruptcy Court for the	: SOUTHERN DISTRICT	OF OHIO		
(if known)				ı	☐ Check if this is an amended filing
	Form 106Sum				
Summa	12/15				

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	142,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	76,051.93
	1c. Copy line 63, Total of all property on Schedule A/B	\$	218,551.93
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	176,453.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	26,965.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	2,005.00
	Your total liabilities	\$	205,423.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	3,501.19
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,296.0
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Page 9 of 54
Case number (if known) Document

Debtor 1 Melissa Ann Stevens

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,471.39

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	I otal d	ciaim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	26,965.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	26,965.00

Official Form 106A/B	ebtor 1 ebtor 2 pouse, if filing) nited States I ase number Official F Schedueach category	Melissa Ann First Name First Name Bankruptcy Court for Orm 106A/E	Middle Middle the: SOUTHER	Name	Last Name Last Name				
First Name Modele Name Last Name First Name Modele Name Last Name	ebtor 2 pouse, if filing) nited States I ase number official F schedueach category	First Name First Name Bankruptcy Court for orm 106A/E Ile A/B: Pi	Middle Middle the: SOUTHER	e Name	Last Name				
First Name Modele Name Last Name First Name Modele Name Last Name	ebtor 2 pouse, if filing) nited States I ase number official F schedueach category	First Name First Name Bankruptcy Court for orm 106A/E Ile A/B: Pi	Middle Middle the: SOUTHER	e Name	Last Name				
Source Hilling First Name Middle Name Last Name	pouse, if filing) nited States I ase number Official F Schedueach category	orm 106A/E	the: SOUTHER						
Inited States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO case number	nited States I ase number official F chedueach category	orm 106A/E	the: SOUTHER						
Check if this is amended filing Check Ch	official F	orm 106A/E	<u> </u>	N DISTI	RICT OF OHIO				
Athens OH 45701-0000 City State Athens OH 45701-0000 City State Athens OH 45701-0000 City State County Athens OH 45701-0000 City State City County Athens OH 45701-0000 City City City City County Athens OH 45701-0000 City City City City City City City City	official F	ıle A/B: Pı	_						
Athens OH 45701-0000 City State Athens OH 45701-0000 City State Athens OH 45701-0000 City State County Athens OH 45701-0000 City State City County Athens OH 45701-0000 City City City City County Athens OH 45701-0000 City City City City City City City City	official F	ıle A/B: Pı	_						
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? Condominium or cooperative Street address, if available, or other description City State ZIP Code Land City State ZIP Code Land City State ZIP Code Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Check iff this is community property City is instructions) City Check iff this is community property City Check iff this is community property City Cit	chedu	ıle A/B: Pı	_					_	
ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where yo ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best of the property? Check all that apply are additional pages, write your name and case number (if known). It is best of the property? Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2.	chedu	ıle A/B: Pı	_						
ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where yo ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). It is best of the property? Check all that apply are additional pages, write your name and case number (if known). It is best of the property? Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2.	chedu	ıle A/B: Pı	_						
act category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you not in this best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). swere every question. The property of the p	each category		ronerty						
ink it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct formation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the property? If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the property? If the more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). If the property? If the property are already pages and another of the debtors and another of the debtor		sanarataly list and d	Operty					12/15	
ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). swer every question. It is not be suited in the property of the same and case number (if known). Swer every question. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Athens OH 45701-0000 City State ZIP Code Investment property Investment property Investment property Investment property? Check one State Other Other Other Other Investment property? Check one Investment property? Check one Other Other Other of the entire is a life estate), if known. Athens OH 4 45701-0000 At least one of the debtors and another Other information you wish to add about this item, such as local		, separatery iist and u	escribe items. List	an asset	only once. If an asset fits in more than on	e category, list the asse	t in the	category where you	
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? 1 6011 Baker Road	ormation. If m	ore space is needed,							
Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? **Total Baker Road** Street address, if available, or other description** Athens** OH** 45701-0000 City** State** ZIP Code** What is the property? Check all that apply Single-family home that apply the amount of any secured claims or exemptions. Put the amount of any secured claims or exemptions. Put the amount of any secured claims on Schedule Dr. Creditors Who Have Claims Secured by Property. Manufactured or mobile home Land** Land** Manufactured or mobile home Land** Land** Investment property* Timeshare Other Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	swer every qu	estion.							
What is the property? Check all that apply Street address, if available, or other description	art 1: Descri	oe Each Residence, B	uilding, Land, or Ot	her Real	Estate You Own or Have an Interest In				
What is the property? Check all that apply Street address, if available, or other description	D								
What is the property? Check all that apply G011 Baker Road Sireet address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do you own o	r nave any legal or eq	juitable interest in a	ıny resia	ence, building, land, or similar property?				
What is the property? Check all that apply Gotto Street address, if available, or other description Single-family home Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Manufactured or mobile home Land Current value of the entire property? State ZIP Code Investment property Timeshare Other Other Who has an interest in the property? Check one Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Athens County Check if this is community property Check if this is community Check if this is	No. Go to F	Part 2.							
Single-family home	Yes. Wher	e is the property?							
Single-family home									
Single-family home									
Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative	1			What	is the property? Check all that apply				
Athens OH 45701-0000 City State ZIP Code Investment property Investment property Other Other Who has an interest in the property? Check one Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local Current value of the entire property? \$142,500.00 \$142,	6011 Ba	ker Road			Single-family home	Do not deduct secure	d claims	s or exemptions. Put	
Condominium or cooperative Manufactured or mobile home Land Current value of the entire property? Check one Investment property In	Street addre	ss, if available, or other des	scription		Duplex or multi-unit building				
Athens OH 45701-0000 City State ZIP Code Investment property Inves					Condominium or cooperative	Greatere vine riave	oidiii io (socaroa by 1 roporty.	
Athens OH 45701-0000 City State ZIP Code Investment property Inves				_	Manufactured or mobile home				
Athens City State ZIP Code Investment property Timeshare Other Other Who has an interest in the property? Check one Debtor 1 only County County City State ZIP Code Investment property S142,500.00 S142,500.00 S142,500.00 S142,500.00 S142,500.00 S142,500.00 S142,500.00 S142,500.00 Debcribe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local			.=	_		Current value of the	c	Current value of the	
Athens County Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local				_		• • •	•	· .	
Athens County Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, a life estate), if known. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	City	State	ZIP Code			\$142,500.0	<u> </u>	\$142,500.0	
Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only At least one of the debtors and another Other information you wish to add about this item, such as local									
Athens Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local				_		• • • • • • •			
Athens County Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local				Wile	• • •	,,			
County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local	Athens				•				
At least one of the debtors and another Other information you wish to add about this item, such as local	County				•				
Other information you wish to add about this item, such as local					•		commu	nity property	
·				Othe		,			
					_	,			
				•					

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.......

\$142,500.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Official Form 106A/B Schedule A/B: Property page 2

■ No

☐ Yes. Describe.....

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 12 of 54 Case number (if known)

	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ■ Yes. Describe	
	Sig Sauer 380 P29ors	\$50.00
ļ	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe	
	Clothing	\$200.00
1	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, □ No ■ Yes. Describe	, gems, gold, silver
	Jewelry	\$1,500.00
 	Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe Any other personal and household items you did not already list, including any health aids you did not No Yes. Give specific information	ot list
	Log Splitter	\$1,500.00
	. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attactor Part 3. Write that number here	
	you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you file you have in your wallet, in your home, in a safe deposit box, and on hand when you have in your wallet, in your home, in a safe deposit box, and on hand when you have in your wallet, in your home, in a safe deposit box, and on hand when you have in your wallet, in your home, in your wallet, in your wal	our petition
	Cash	\$100.00
I	Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, bro institutions. If you have multiple accounts with the same institution, list each. □ No ■ Yes	okerage houses, and other similar
	17.1. Checking Chase Checking xxxxxxxxxxxxx3158	\$525.00

Official Form 106A/B

Debtor 1

Schedule A/B: Property

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 13 of 54

De	ebtor 1 <u>Melissa An</u>	n Stever	is	Case number (it known)	
		17.2.	Savings	Chase xxxxxxxxxxx3069	\$54.73
		17.3.	Savings	Chase xxxxxxxxxx6705	\$2,001.43
18.	Bonds, mutual funds Examples: Bond funds No			rokerage firms, money market accounts	
	☐ Yes		Institution or issue	r name:	
19.	Non-publicly traded s joint venture ■ No □ Yes. Give specific in	nformation		porated and unincorporated businesses, including an interes % of ownership:	t in an LLC, partnership, and
20.	Negotiable instrument	ts include ments are formation	personal checks, ca those you cannot to	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
21.	Retirement or pensio Examples: Interests in No Yes. List each accou	ı IRA, ERI	SA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing	plans
			of account:	Institution name:	
		Thrif	t Saving	Thrift Savings	\$38,595.77
22.		ed deposi	ts you have made s	so that you may continue service or use from a company i, public utilities (electric, gas, water), telecommunications compar Institution name or individual:	nies, or others
23.	■ No		dic payment of mor	ney to you, either for life or for a number of years)	
24.	Interests in an educat 26 U.S.C. §§ 530(b)(1) ■ No			qualified ABLE program, or under a qualified state tuition pro	ogram.
	☐ YesI	nstitution	name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	:
25.	Trusts, equitable or f ■ No □ Yes. Give specific in			other than anything listed in line 1), and rights or powers exe	ercisable for your benefit
26.		main nam	es, websites, proce	and other intellectual property eds from royalties and licensing agreements	
27.	Licenses, franchises	, and othe ermits, exc	er general intangib lusive licenses, cod	oles operative association holdings, liquor licenses, professional licens	es

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 14 of 54

Debtor 1	Melissa Ann Stevens	Document	Cas	e number (if known)	
Money or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
_	funds owed to you				
■ No □ Yes	. Give specific information about them, ir	ncluding whether you alre	ady filed the returns and the	ne tax years	
■ No	y support pples: Past due or lump sum alimony, spo	ousal support, child supp	ort, maintenance, divorce	settlement, property se	ttlement
Exam ■ No	amounts someone owes you ples: Unpaid wages, disability insurance benefits; unpaid loans you made to Give specific information.		efits, sick pay, vacation pa	ay, workers' compensa	ation, Social Security
31. Intere	sts in insurance policies sples: Health, disability, or life insurance;	health savings account (HSA); credit, homeowner's	s, or renter's insurance	
■ No □ Yes	Name the insurance company of each Company name:		Beneficiary:		Surrender or refund value:
If you some	nterest in property that is due you from are the beneficiary of a living trust, experience has died. Give specific information			rently entitled to receiv	e property because
Exam ■ No	s against third parties, whether or not uples: Accidents, employment disputes, it. Describe each claim			payment	
■ No	contingent and unliquidated claims of a Describe each claim	of every nature, includin	g counterclaims of the d	ebtor and rights to so	et off claims
■ No	nancial assets you did not already lis . Give specific information	t			
	the dollar value of all of your entries that 4. Write that number here				\$41,276.93
Part 5: D	escribe Any Business-Related Property Yo	u Own or Have an Interest	In. List any real estate in Pa	rt 1.	
	own or have any legal or equitable interes	t in any business-related p	roperty?		
_	Go to line 38.				
	escribe Any Farm- and Commercial Fishing you own or have an interest in farmland, list it		n or Have an Interest In.		

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

page 5

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

Document Page 15 of 54 Debtor 1 Case number (if known) Melissa Ann Stevens Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ■ No ☐ Yes..... 48. Crops-either growing or harvested No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ■ Yes..... Tractor \$20,950.00 50. Farm and fishing supplies, chemicals, and feed No □ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ■ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached \$20,950.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$142,500.00 Part 2: Total vehicles, line 5 \$8,875.00 57. Part 3: Total personal and household items, line 15 \$4,950.00 58. Part 4: Total financial assets, line 36 \$41,276.93

63. Total of all property on Schedule A/B. Add line 55 + line 62

60. Part 6: Total farm- and fishing-related property, line 52

\$218,551.93

\$76,051.93

\$0.00

\$0.00

Copy personal property total

\$20,950.00

\$76,051.93

59. Part 5: Total business-related property, line 45

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

		Docume	III I UUC IO OI JT	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Melissa Ann Stev	rens		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
6011 Baker Road Athens, OH 45701 Athens County	\$142,500.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(1)	
2011 Ford Explorer XLT 183000 miles Line from Schedule A/B: 3.1	\$8,875.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(2)	
Ellie II oli i ochedate A/D. G. I			100% of fair market value, up to any applicable statutory limit	2020.00(1)(2)	
Various items of household goods Line from Schedule A/B: 6.1	\$1,250.00		\$1,250.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Ellie Holli Gonedale A. B. G. I			100% of fair market value, up to any applicable statutory limit	2020.00(\(\)(\(\)(\(\))	
Books and photos Line from Schedule A/B: 6.2	\$300.00		\$300.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Line Horr Schedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(4)(a)	
Home Computer Line from Schedule A/B: 7.1	\$150.00		\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Ellic Hotti Goricadio 7/D. 111			100% of fair market value, up to	2020:00(r),(-),(d)	

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Debtor 1 Melissa Ann Stevens Page 17 of 54
Case number (if known)

Denic	IVIEIISSA AIIII SIEVEIIS			Case number (ii known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Sig Sauer 380 P29ors Line from Schedule A/B: 10.1	\$50.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
				100% of fair market value, up to any applicable statutory limit	,
	Clothing ine from Schedule A/B: 11.1	\$200.00		\$200.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
				100% of fair market value, up to any applicable statutory limit	
	lewelry ine from <i>Schedule A/B</i> : 12.1	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)
				100% of fair market value, up to any applicable statutory limit	(/ / / /
	Cash ine from <i>Schedule A/B</i> : 16.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(3)
_				100% of fair market value, up to any applicable statutory limit	2020100(1.1)(0)
	Checking: Chase Checking	\$525.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
L	ine from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,
	Savings: Chase xxxxxxxxxxx3069 ine from Schedule A/B: 17.2	\$54.73		\$54.73	Ohio Rev. Code Ann. § 2329.66(A)(18)
_	and none governor v.S			100% of fair market value, up to any applicable statutory limit	2020100(1.1)(1.0)
	Savings: Chase xxxxxxxxxx6705 ine from Schedule A/B: 17.3	\$2,001.43		\$1,195.27	Ohio Rev. Code Ann. § 2329.66(A)(18)
_				100% of fair market value, up to any applicable statutory limit	
	Fractor ine from Schedule A/B: 49.1	\$20,950.00		\$0.00	Ohio Rev. Code Ann. § 2329.66(A)(18)
_				100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	nt)
(-	Subject to adjustment on 4/01/19 and every No	3 years after that for ca	ises ii	led on or after the date of adjustmen	n.)
	☐ Yes. Did you acquire the property cover	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	□ No				
	☐ Yes				

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

			Document Pau	E TO 01 24		
Filli	in this informati	ion to identify yοι	ır case:			
Deb	_	Melissa Ann Ste	evens		_	
D . I.		First Name	Middle Name Last Na	ame		
	tor 2 use if, filing)	First Name	Middle Name Last Na	ame	-	
Unit	ad Statas Rankri	uptcy Court for the	: SOUTHERN DISTRICT OF OHIO			
Office	ca Glates Bankit	apicy Court for the	GOOTHERN DIGTRICT OF CHIC		-	
Case (if knd	e number					Market Server
(II KIIC	, wiii,				_	if this is an ded filing
Offi	cial Form 1	06D				
Sc	hedule D	: Creditors	Who Have Claims Secu	ured by Propert	: y	12/15
Be as	complete and ac	curate as possible.	If two married people are filing together, both	are equally responsible for s	upplying correct informa	tion. If more space
s nee			out, number the entries, and attach it to this f			
	•	e claims secured by	v vour property?			
		•	his form to the court with your other schedu	lles. You have nothing else	to report on this form.	
	_	of the information	•	g		
Part		ecured Claims	bolow.			
			more than one secured claim, list the creditor sep	Column A	Column B	Column C
for ea	ach claim. If more	than one creditor has	s a particular claim, list the other creditors in Part	2. As Amount of claim	Value of collateral	Unsecured
much	n as possible, list th	ne claims in alphabeti	cal order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	American Fi		B	n: \$163,041.00	\$142,500.00	\$20,541.00
	Resources, I	nc.	Describe the property that secures the claim 6011 Baker Road Athens, OH 4570		Ψ142,300.00	Ψ20,541.00
			Athens County	'1		
	Po Box 8068		As of the date you file, the claim is: Check all	that		
	3637 Sentara	-	apply.	tnat		
		ch, VA 23452	Contingent			
	Number, Street, City	, State & Zip Code	Unliquidated			
Who	owes the debt?	Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ D	ebtor 1 only		☐ An agreement you made (such as mortgage	e or secured		
	ebtor 2 only		car loan)			
	ebtor 1 and Debto	r 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)		
ПА	t least one of the d	ebtors and another	☐ Judgment lien from a lawsuit			
	theck if this claim community debt	relates to a	Other (including a right to offset)	Mortgage		
,	community debt					
		Opened 12/14 Last				
		Active				
Date	debt was incurre		Last 4 digits of account number	454		
	_					
2.2	USAA Feder	al Savings	Describe the property that secures the clain	n: \$13,412.00	\$8,875.00	\$4,537.00
	Bank Creditor's Name		2011 Ford Explorer XLT 183000			<u> </u>
			miles			
	Attn: Bankru		As of the date you file, the claim is: Check all	that		
	9800 Frederi	•	apply.	uici		
	San Antonio		Contingent			
	Number, Street, City	, State & ZIP Code	☐ Unliquidated☐ Disputed			
Who	owes the debt?	Check one.	Nature of lien. Check all that apply.			
■ D	ebtor 1 only		☐ An agreement you made (such as mortgage	e or secured		
	ebtor 2 only		car loan)			
	ebtor 1 and Debto		☐ Statutory lien (such as tax lien, mechanic's	lien)		
ШΑ	t least one of the d	ebtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 19 of 54

Debtor 1	Melissa A	nn Stevens		Cas	e number (if know)
	First Name	Middle N	ame Last Name		
	if this claim re unity debt	elates to a	Other (including a right to offset)		
Date debt	was incurred	Opened 08/14 Last Active 3/30/17	Last 4 digits of account number	3539	
If this is Write tha	the last page of the last number here	of your form, add e:	olumn A on this page. Write that number the dollar value totals from all pages. r a Debt That You Already Listed	r here:	\$176,453.00 \$176,453.00
trying to co	ollect from your	u for a debt you o	we to someone else, list the creditor in F you listed in Part 1, list the additional c	Part 1, and then	ady listed in Part 1. For example, if a collection agency is list the collection agency here. Similarly, if you have more you do not have additional persons to be notified for any
Kir Ke 75	n Hammon ith d. Wein	er & Associate lare, 4th Floor	es, Co., L.P.A		ne in Part 1 did you enter the creditor? 2.1 of account number 1454

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

				Document	Page	20 of 5	o4		
Filli	n this information	n to identify your o	case:						
Debt	tor 1 M	elissa Ann Steve	ens						
	Firs	st Name	Middle	Name	Last Nam	Э	_		
Debt		st Name	Middle	Name	Last Nam	9			
	•					-			
Unite	ed States Bankrup	tcy Court for the:	SOUTHER	RN DISTRICT OF O	НЮ				
Case	e number								
(if kno	wn)							-	if this is an
								amend	ed filing
Offi	cial Form 10	6F/F							
			ho Hav	e Unsecured	Claim	s			12/15
ny ex sched sched eft. A ame	xecutory contracts of dule G: Executory C dule D: Creditors WI ttach the Continuat and case number (i	or unexpired leases to tracts and Unexpired to Have Claims Section Page to this page if known).	that could re ired Leases (ured by Prop e. If you have	esult in a claim. Also (Official Form 106G). erty. If more space is e no information to re	list executo Do not inclu needed, co	ry contract ide any cre py the Part	or creditors with NON is on Schedule A/B: P ditors with partially s you need, fill it out, I lite that Part. On the to	roperty (Official Form ecured claims that a number the entries ir	m 106A/B) and on re listed in the boxes on the
Part		our PRIORITY Un							
_	Oo any creditors hav ☐ No. Go to Part 2.	ve priority unsecured	d claims agai	inst you?					
	_								
2. L id p	dentify what type of coossible, list the claim	laim it is. If a claim hans in alphabetical orde	s both priority r according to	/ and nonpriority amou	nts, list that of you have m	claim here a	st the creditor separate ind show both priority a o priority unsecured cla	nd nonpriority amount	s. As much as
(For an explanation of	f each type of claim, s	ee the instruc	ctions for this form in th	e instruction	booklet.)			
							Total claim	Priority amount	Nonpriority amount
2.1	Internal Rev	enue Service		Last 4 digits of accou	unt number		\$10,000.00	\$10,000.00	\$0.00
	Priority Creditor's	s Name		Mhan waa tha dabt is	· · · · · · · · · · · · · · · · · ·				
	Cincinnati. (OH 45999-0149		When was the debt in	ncurrea?				
		ity State Zlp Code		As of the date you file	e, the claim	is: Check a	all that apply		
	Who incurred the d	lebt? Check one.		☐ Contingent					
	Debtor 1 only			☐ Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and De	btor 2 only		Type of PRIORITY un	secured cla	ıim:			
	☐ At least one of th	ne debtors and anothe	r	☐ Domestic support of	obligations				
	☐ Check if this cla	aim is for a commun	ity debt	■ Taxes and certain	other debts y	ou owe the	government		
	Is the claim subjec	t to offset?		☐ Claims for death or	r personal inj	ury while yo	ou were intoxicated		
	■ No			☐ Other. Specify					
	☐ Yes			T	ax				
2.2	Internal Rev	enue Service s Name		Last 4 digits of accou			\$13,965.00	\$13,965.00	\$0.00
	Cincinnati (OH 45999-0149		When was the debt in	ncurred?	2017			
		ity State Zlp Code		As of the date you file	e, the claim	is: Check a	all that apply		
	Who incurred the d	lebt? Check one.		☐ Contingent					
	Debtor 1 only			☐ Unliquidated					
	Debtor 2 only			☐ Disputed					
	Debtor 1 and De	btor 2 only		Type of PRIORITY un	secured cla	iim:			
	☐ At least one of th	ne debtors and anothe	r	☐ Domestic support of	obligations				
	☐ Check if this cla	aim is for a commun	ity debt	■ Taxes and certain	other debts v	ou owe the	government		
	Is the claim subjec		=	☐ Claims for death or	-		=		
	No			☐ Other. Specify					
	☐ Yes				017 Taxes	s Due			

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 21 of 54

Debtor 1 Melissa Ann Stevens		Case number (if know)		
State of Ohio Department of Taxation	Last 4 digits of account number	\$3,000.00	\$0.00	\$3,000.00
Priority Creditor's Name P.O. Box 182131 Columbus, OH 43218-2131	When was the debt incurred?			
Number Street City State ZIp Code	As of the date you file, the claim is:	Check all that apply		
Who incurred the debt? Check one.	☐ Contingent			
Debtor 1 only	☐ Unliquidated			
Debtor 2 only	☐ Disputed			
☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ At least one of the debtors and another	☐ Domestic support obligations			
☐ Check if this claim is for a community debt	■ Taxes and certain other debts you	owe the government		
Is the claim subject to offset?	☐ Claims for death or personal injury	•		
■ No	☐ Other. Specify	•		
Yes	Taxes			
 List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each c than one creditor holds a particular claim, list the other Part 2. 	laim. For each claim listed, identify what	type of claim it is. Do not list claims alr	eady included in F	Part 1. If more tion Page of
Chan		4400	Total C	
4.1 Cbcs Nonpriority Creditor's Name	Last 4 digits of account number	4402		\$506.00
Po Box 1085	When was the debt incurred?	Opened 5/05/15		
Columbus, OH 43216 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt		ration agreement or divorce that you	did not	
Is the claim subject to offset?	report as priority claims			
■ No	☐ Debts to pension or profit-sharing	••		
☐ Yes	■ Other. Specify South Cent	ral Power Co		

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 22 of 54

Debtor 1 Melissa Ann Stevens Document Page 22 01 54

Case number (if know)

Harley Davidson Financial	Last 4 digits of account number	8424	\$1,499.00
Nonpriority Creditor's Name Attention: Bankruptcy Po Box 22048	When was the debt incurred?	Opened 2/06/14 Last Active 10/25/14	
Carson City, NV 89721	when was the debt incurred?	10/25/14	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Automobile)	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 26,965.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 26,965.00
	6f.	Student loans	6f.	\$ Total Claim
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2,005.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 2,005.00

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

		Dodaine	T dac 20 or 04	
Fill in this infor	mation to identify your	case:		
Debtor 1	Melissa Ann Stev	rens		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Verizon
P.O. Box 25505
Lehigh Valley, PA 18002-5505

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main

		Docume	nt Page 24 o	of 54
Fill in this	information to identify your	case:		
Debtor 1	Melissa Ann Stev	/ens		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	ites Bankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
	lule H: Your Cod	lahtars		12/45
Scried	iule II. Toul Cou	EDIOIS		12/15
eople are ill it out, a our name	filing together, both are equ	ially responsible for supper boxes on the left. Attach). Answer every question	olying correct information the Additional Page to	s complete and accurate as possible. If two married ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.
_	, ,	,		
■ No				
☐ Yes	3			
	hin the last 8 years, have you na, California, Idaho, Louisiana			y? (Community property states and territories include ngton, and Wisconsin.)
■ No.	. Go to line 3.			
☐ Yes	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make s	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
<u> </u>	Name			☐ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_
	City	State	ZIP Code	
3.2				□ Sahadula D. lina
3.2	Name			_ □ Schedule D, line □ Schedule E/F, line
				☐ Schedule G, line
-	Number Street			_

ZIP Code

Schedule H: Your Codebtors

State

City

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 25 of 54

Fill	in this information to identify your	case:							
Del	otor 1 Melissa An	n Stevens							
	otor 2				_				
Uni	ted States Bankruptcy Court for the	e: SOUTHERN DISTRIC	CT OF OHIO		_				
	se number nown)		-				ended filir Iement sh	J	petition chapter g date:
O.	fficial Form 106I					MM / E	D/ YYYY	-	
S	chedule I: Your Inc	ome							12/15
spo atta	plying correct information. If you use. If you are separated and you has separate sheet to this form. Describe Employment	ur spouse is not filing w On the top of any additi	ith you, do not includ	le inforr	natio	on about you	spouse.	If more spa	ace is needed,
1.	Fill in your employment information.		Debtor 1			Deb	tor 2 or n	on-filing sp	pouse
	If you have more than one job, attach a separate page with	Employment status	■ Employed				mployed		
	information about additional	p.:0,	☐ Not employed				lot employ	yed	
	employers.	Occupation	Mail Handler						
	Include part-time, seasonal, or self-employed work.	Employer's name	USPS						
	Occupation may include student or homemaker, if it applies.	Employer's address	2323 City Gate D Columbus, OH 4						
		How long employed t	here?						
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	port for	any l	line, write \$0 ii	n the spac	e. Include y	our non-filing
•	u or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all e	mplo	oyers for that p	erson on	the lines be	low. If you need
						For Debtor 1		or Debtor 2 on-filing spo	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,471	39 \$_		N/A
3.	Estimate and list monthly over	time pay.		3.	+\$	0	00 +\$		N/A

4,471.39

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 26 of 54

Debt	or 1	Melissa Ann Stevens	-	(Case	number (if know	n)				
					For	Debtor 1			ebtor iling s	2 or pouse	
	Cop	by line 4 here	4.		\$_	4,471.3	9	\$		N/A	-
5.	List	t all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$	1,126.4	1	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k	ο.	\$_	0.0	0	\$		N/A	-
	5c.	Voluntary contributions for retirement plans	50		\$_	0.0		\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$_	0.0		\$		N/A	-
	5e.	Insurance	56		\$_ \$	343.7		\$		N/A	-
	5f. 5g.	Domestic support obligations Union dues	5f 5g		^Φ _	0.0 0.0	_	\$		N/A N/A	-
	5h.	Other deductions. Specify:		ง. า.+	\$ -	0.0	_	+ \$		N/A	-
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$ \$	1,470.2		\$		N/A	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		* — \$	3,001.1		\$		N/A	-
8.		* * *	٠.		Ψ_	3,001.1	_	Ψ		IVA	-
Ο.	8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total	_		_		_				
	٥L	monthly net income. Interest and dividends	88		\$_ \$	0.0	_	\$		N/A	-
	8b. 8c.	Family support payments that you, a non-filing spouse, or a dependent	8k	٥.	Φ_	0.0	U	Φ		N/A	-
	00.	regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce	0	_	•		_	Φ.			
	04	settlement, and property settlement.	80 80		\$ \$	0.0		\$		N/A	-
	8d. 8e.	Unemployment compensation Social Security	86		\$ _	0.0	_	\$		N/A N/A	-
	8f.	Other government assistance that you regularly receive	00	٠.	Ψ_	0.0	_	Ψ		IV/A	-
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	:								
		Specify:	8f		\$	0.0	0	\$		N/A	_
	8g.	Pension or retirement income	86	_	\$	0.0		\$		N/A	-
	8h.	Other monthly income. Specify: Fiance	_ 8h	า.+	\$_	500.0	0	+ \$		N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [\$	500.0	0	\$		N/A	\
10	Cal	aulata manthiu inaama. Add lina 7 u lina 0	40	¢.		2 504 40	¢.		NI/A	¢.	2 504 40
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		3,501.19 +	\$_		N/A	= \$ _	3,501.19
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep			,		•	hedule 11.		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies							12.	\$	3,501.19
46	_		_						l	Combine month!	ned y income
13.	■	you expect an increase or decrease within the year after you file this form No.	′								

Official Form 106I Schedule I: Your Income page 2

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 27 of 54

Fill in	n this informa	ition to identify yo	our case:					
Debto		Melissa Ann				Checl	c if this is:	
Debto	or 2					_	An amended filing	ving postpetition chapter
	use, if filing)							the following date:
Unite	ed States Bankı	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIO	<u> </u>	1	MM / DD / YYYY	
Case (If kn	number							
Of	ficial Fo	rm 106J						
		J: Your						12/1
info	rmation. If m		eded, atta	. If two married people ar ch another sheet to this n.				
Part		ribe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ 105. D0 0		ш а осра	ate mousemola.				
	=	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debte	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								Yes
								□ No
3.	Do your exp	oenses include	_	No	-			☐ Yes
	expenses o	f people other t d your depende	han _	Yes				
	<u> </u>							
expe	mate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
• • •								
the v	•	h assistance an		government assistance i luded it on Schedule I: \	•		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgage	e 4. \$		0.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				ıpkeep expenses		4c. \$		50.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
Ο.	, .uuiii oiidi i	range payiii	J. 11.5 101 Y	rai reelaciiee, sacii as 110	mo oquity idanio	υ. ψ		0.00

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 28 of 54

Debtor	1 Melissa Ann Stevens	Case num	ber (if known)	
6. U 1	tilities:			
6. G i		6a.	\$	230.00
6b		6b.	·	60.00
60		6c.		0.00
60		6d.	·	0.00
	pod and housekeeping supplies	— 7.	\$	400.00
	hildcare and children's education costs	8.	\$	
_		9.	\$	0.00
	othing, laundry, and dry cleaning			75.00
	ersonal care products and services	10.	\$	75.00
	edical and dental expenses	11.	\$	50.00
	ransportation. Include gas, maintenance, bus or train fare. o not include car payments.	12.	\$	250.00
	ntertainment, clubs, recreation, newspapers, magazines, and books	13.	· -	40.00
	naritable contributions and religious donations	14.		0.00
	•	14.	Φ	0.00
	surance. onot include insurance deducted from your pay or included in lines 4 or 20.			
	ia. Life insurance	15a.	\$	0.00
	5b. Health insurance	15a. 15b.		0.00
	ic. Vehicle insurance	15c.		66.00
	6d. Other insurance. Specify:	15d.	·	
		13u.	Ψ	0.00
	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	stallment or lease payments:		Ψ	0.00
	'a. Car payments for Vehicle 1	17a.	\$	0.00
	'b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17b.	·	
	• • •		·	0.00
	'd. Other. Specify:	17d.	Ф	0.00
	our payments of alimony, maintenance, and support that you did not report as educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).		\$	0.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.	Ψ	0.00
	ther real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income	
	a. Mortgages on other property	20a.		0.00
	Db. Real estate taxes	20b.		0.00
	oc. Property, homeowner's, or renter's insurance	20c.	·	0.00
	od. Maintenance, repair, and upkeep expenses	20d.	·	0.00
			·	
	De. Homeowner's association or condominium dues	20e.	· ·	0.00
1. O 1	ther: Specify:	21.	+\$	0.00
2. C a	alculate your monthly expenses			
	2a. Add lines 4 through 21.		\$	1,296.00
	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	-,
	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,296.00
22	Add into 22a and 22b. The result is your monthly expenses.		Ψ	1,280.00
3. C a	alculate your monthly net income.			
23	Ba. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,501.19
	Bb. Copy your monthly expenses from line 22c above.	23b.	-\$	1,296.00
	• • •			,
23	3c. Subtract your monthly expenses from your monthly income.			0.005 10
	The result is your monthly net income.	23c.	\$	2,205.19
24. D e	you expect an increase or decrease in your expenses within the year after your	ou file this	form?	
Fo	or example, do you expect to finish paying for your car loan within the year or do you expect you			se or decrease because
_	odification to the terms of your mortgage?			
	No			
	Yes Explain here:			

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 29 of 54

Fill in thi	is information to identify your	case:			
Debtor 1	Melissa Ann Stev	ens			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Middle Name	Last Name		
(Spouse II, I	niing) i iist Name	Wildule Name	Last Name		
United St	tates Bankruptcy Court for the:	SOUTHERN DISTRICT	T OF OHIO		
Case nur	mher				
(if known)					☐ Check if this is an
					amended filing
	. ==				
	l Form 106Dec		_		
Decl	aration About a	ın Individual	l Debtor's Sc	hedules	12/15
f two ma	rried people are filing together	r, both are equally respo	onsible for supplying corr	ect information.	
You must	t file this form whenever you fi	le bankruptcy schedule	s or amended schedules.	Making a false statement.	concealing property, or
obtaining	money or property by fraud in	n connection with a ban			
years, or	both. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an atto	rnev to help you fill out be	ankruptcy forms?	
	,,		., , ,		
	No				
П	Yes. Name of person			Attach Bankruptcv	Petition Preparer's Notice,
_					Signature (Official Form 119)
Unde	er penalty of perjury, I declare	that I have read the sun	nmary and schedules filed	I with this declaration and	
	they are true and correct.				
v	/a/ Maliaga Ann Stavana		v		
	/s/ Melissa Ann Stevens Melissa Ann Stevens		X Signature of I	Debtor 2	
	Signature of Debtor 1		Olginaturo or i		
	_				
	Date May 30, 2017		Date		

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 30 of 54

		nation to identify you				
Dec	otor 1	Melissa Ann Ste	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Unit	ted States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT O	OF OHIO		
Cas (if kn	se number own)				_	heck if this is an mended filing
Sta Be a info	s complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup	
	<u> </u>	,	arital Status and Where You	Lived Before		
1.	What is your	r current marital statu	ıs?			
	☐ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>.</i>	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Ot	fficial Form 106H).		
Par	t 2 Explai	n the Sources of You	r Income			
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No ■ Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,486.25	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Case 2:17-bk-53430

Page 31 of 54
Case number (if known) Document Debtor 1 Melissa Ann Stevens

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap	pply. (b	ross income before deductions and exclusions)
	last calen nuary 1 to	dar year: December	31, 2016)	■ Wages, commissions, bonuses, tips	\$47,196.00	☐ Wages, comn bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
		dar year be December		■ Wages, commissions, bonuses, tips	\$42,494.00	☐ Wages, comn bonuses, tips	nissions,	
				☐ Operating a business		☐ Operating a b	ousiness	
5.	Include include and other winnings. List each s	come regard public bene If you are fil	lless of wheth fit payments; ing a joint cas he gross inco	e during this year or the two ner that income is taxable. Exa pensions; rental income; inter se and you have income that y ome from each source separar	amples of other income are a rest; dividends; money collec- you received together, list it co	llimony; child suppo ted from lawsuits; ro only once under Deb	oyalties; and ga otor 1.	
				Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inco Describe below.	(b	ross income before deductions and exclusions)
	last calen nuary 1 to	dar year: December	31, 2016)	Retirement Income	\$56,259.00			
		dar year be December		EEOC Settlement	\$135,800.00			
	, o Lie	O		Mada Bafana Van Ellad fan I	D			
			•	Made Before You Filed for				
6.	Are either ☐ No.	Neither De	ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househo	ımer debts. Consumer debt	s are defined in 11 l	U.S.C. § 101(8)	as "incurred by an
		During the	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	I of \$6,425* or more	∍?	
		□ No.	Go to line 7					
		☐ Yes	paid that cr not include	each creditor to whom you pai editor. Do not include paymer payments to an attorney for th t on 4/01/19 and every 3 years	nts for domestic support oblights bankruptcy case.	ations, such as chil	ld support and a	
	Yes.			or both have primarily consu		I of \$600 or more?		
		■ No.	Go to line 7	·.				
		☐ Yes	include pay	each creditor to whom you pai ments for domestic support o				
			attorney for	this bankruptcy case.				

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Page 32 of 54 Document Debtor 1 Melissa Ann Stevens Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Amount you **Insider's Name and Address** Dates of payment Total amount Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name paid still owe Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? 9 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number American Financial Resource, Inc. **Foreclosure Athens County Court of** Pending 3637 Sentara Way Common Plea □ On appeal Virginia Beach VA 23452 1 South Court Street, 4th □ Concluded Floor VS. Athens, OH 45701 Melissa Witaker aka Melissa A. Whitaker aka Melissa Ann Whitaker aka Melissa A. Steven 6011 Baker Road Athens, Ohio 45701 17 CI 0015 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details.

Describe the action the creditor took

Amount

Creditor Name and Address

Date action was

taken

Debtor 1 Melissa Ann Stevens Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: Seth & Angie Waldron \$1,000.00 2261 Sams Road Albany, OH 45710 Person's relationship to you: Parents 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No п Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Amount of Date payment transferred **Address** or transfer was payment Email or website address made Person Who Made the Payment, if Not You Cricket Credit Counseling 4/25/17 \$36.00 219 SW Stark St. Suite 200 Portland, OR 97204

Case 2:17-bk-53430

Doc 1

Filed 05/30/17

Document

Page 33 of 54

Entered 05/30/17 12:10:17 Desc Main

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Page 34 of 54 Case number (if known) Document

Debtor 1 Melissa Ann Stevens

20.

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
	Adam Baker Attorney & Counselor-at-Law, 8 North Court Street, Suite 212 Athens, OH 45701 adambakerlaw@frontier.com	Attorney Fees			4/5/17	\$1,750.00
17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that you No Yes. Fill in the details.	rs or to make payment			or transfer any prope	erty to anyone who
	Person Who Was Paid Address	Description and transferred	value of any prope	rty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial aff ade as security (such as	airs? the granting of a sec			
	Person Who Received Transfer Address Person's relationship to you	Description and property transfer			any property or received or debts change	Date transfer was made
	Brandon Zeigler 711 Beaver Creek Road Piketon, OH 45661	2004 Ford F-25	0.00	13,500.00)	2/24/17
	None					
	Lee Bolen, Jr.	1990Four Wind Horizon 20'9" E		500.00		4/3/17
	None					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a se	lf-settled tru	ıst or similar device	of which you are a
	Name of trust	Description and	value of the proper	ty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	etrumente. Safa Danasi	it Dayso and Store	ao Unito		made
	<u> </u>	•	•	•		
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated to the cooperative of the cooperative o	or other financial accou	ints; certificates of			
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and	Last 4 digits of	Type of account	or Da	te account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	clo	sed, sold, oved, or	before closing or transfer

transferred

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 35 of 54 Case number (if known)

Debtor 1 Melissa Ann Stevens

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securit cash, or other valuables?					
	No				
	Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your home within 1	year before you filed for bankruptcy	?	
	NoYes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?	
Par	19: Identify Property You Hold or Control fo	r Someone Else			
23.	Do you hold or control any property that some for someone.	eone else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust	
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value	
Par	t 10: Give Details About Environmental Inforr	,			
For	the purpose of Part 10, the following definition	s apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these si	air, land, soil, surface water, ground	- ·		
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		law, whether you now own, operate,	or utilize it or used	
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that	you know about, regardless of wher	they occurred.		
24.	Has any governmental unit notified you that you	ou may be liable or potentially liable	under or in violation of an environment	ental law?	
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of an	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Address** (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Melissa Ann Stevens **Melissa Ann Stevens** Signature of Debtor 2 Signature of Debtor 1 Date May 30, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person ___. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 2:17-bk-53430

Debtor 1 Melissa Ann Stevens

Doc 1

Filed 05/30/17

Document

Page 36 of 54

Entered 05/30/17 12:10:17 Desc Main

Case number (if known)

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 37 of 54

LBR Form 2016-1(b)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

	Case No.
	Chapter 13
Debtor(s)	Judge
	Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

I. Disclosure

1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I that compensation paid to me within one year before the filing of the petitis services rendered or to be rendered on behalf of the debtor(s) in contemplation follows:	ion in bankruptcy,	or agreed to be paid to me, for
Fo	or legal services, I have agreed to accept		3,500.00
	ior to the filing of this statement I have received	\$	1,750.00
Ва	alance Due	 \$	1,750.00
2.	The source of the compensation paid to me was: ■ Debtor □ Other (specify): The source of compensation to be paid to me is: ■ Debtor □ Other (specify):		
4.	■ I have not agreed to share the above-disclosed compensation with any other associates of my law firm.	er persons unless t	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another persof my law firm. A copy of the agreement, together with a list of the name attached.		

II. Application

- 5. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,500, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,500, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
 - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
 - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
 - c. Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be required;
 - d. Preparation and filing chapter 13 plan, and any preconfirmation amendments thereto that may be required;
 - e. Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in connection with the modification of a plan or the temporary suspension of payments;

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 38 of 54

- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- g. Filing of address changes for the debtor;
- h. Review of claims;
- i. Review of notice of intention to pay claims;
- j. Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings;
- k. Preparation and filing of first motion to suspend or temporarily reduce plan payments;
- 1. Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any motion, objection, or hearing;
- m. Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings;
- n. Preparation and filing of debtor's certification regarding issuance of discharge order;
- o. Routine phone calls and questions;
- p. File maintenance and routine case management; and
- q. Any other duty as required by local decision or policy.

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

May	30,	201	7

Date

/s/ Adam J. Baker

Adam J. Baker

Name

Adam Baker Attorney & Counselor-at-Law, LLC 8 North Court Street, Suite 212 Athens, OH 45701 740-592-9043 Fax: 740-592-9034

adambakerlaw@frontier.com 0059130 Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 39 of 54

Fill in this inform	nation to identify your case:	
Debtor 1	Melissa Ann Stevens	
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the: Southern District of Ohio	
Case number (if known)		

Check	cas directed in lines 17 and 21:
	cording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	1: Calculate Your Average Monthly Income								
	1.	What is your marital and filing status? Check one of	nly.							
		■ Not married. Fill out Column A, lines 2-11.								
		☐ Married. Fill out both Columns A and B, lines 2-11.								
	10 th	Il in the average monthly income that you received from al 11(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the total bouses own the same rental property, put the income from that	month per al by 6. Fil	iod would I in the re	d be March sult. Do not	1 through	gh Aug e any i	just 31. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
							Colur Debt		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (befor	re all	\$	4,471.39	\$	
	3.	Alimony and maintenance payments. Do not include Column B is filled in.	e payme	nts from	a spouse	if	\$	0.00	\$	
	4.	All amounts from any source which are regularly polynous or your dependents, including child support from an unmarried partner, members of your househo and roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include ld, your o	e regulai depende	r contribut ents, paren	ions nts, not	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1						
		Gross receipts (before all deductions)	\$	0.00						
		Ordinary and necessary operating expenses	-\$	0.00						
		Net monthly income from a business, profession, or fa	ırm \$	0.00	Copy he	ere -> 9	\$	0.00	\$	
	6.	Net income from rental and other real property	Debtor	1						
		Gross receipts (before all deductions)	\$	0.00						
		Ordinary and necessary operating expenses	-\$	0.00						
		Net monthly income from rental or other real property	\$	0.00	Copy he	ere -> 9	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 40 of 54

Debtor 1 Melissa Ann Stevens Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.471.39 4,471.39 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,471.39 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 4,471.39 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4,471.39 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). x 12 53,656.68 15b. The result is your current monthly income for the year for this part of the form.

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 41 of 54

Debtor	1	Melissa Ann Stevens	Docu		Case number (if known)		
16.	Cald	culate the median family income that	nt applies to yo	u. Follow these	steps:		
	16a.	a. Fill in the state in which you live.		ОН			
	16h	o. Fill in the number of people in your h	ousehold	1			
		c. Fill in the median family income for you			<u> </u>	\$	46,242.00
		To find a list of applicable median inc instructions for this form. This list ma	come amounts,	go online using	the link specified in the separate	Φ_	
17.	Hov	w do the lines compare?					
	17a.				e 1 of this form, check box 1, <i>Disposable</i> ation of Your Disposable Income (Official		
,	17b.		fill out Calcula	ation of Your D	orm, check box 2, Disposable income is visposable Income (Official Form 122C		
Part :	3:	Calculate Your Commitment Peri	od Under 11 U.	S.C. § 1325(b)	(4)		
18.	Сор	py your total average monthly incom	e from line 11			\$	4,471.39
19.	Ded	duct the marital adjustment if it applited that calculating the commitment pouse's income, copy the amount from line	ies. If you are meriod under 11	narried, your sp	ouse is not filing with you, and you		
	19a.	a. If the marital adjustment does not app	oly, fill in 0 on lir	ne 19a.		-\$	0.00
	19b.	o. Subtract line 19a from line 18.				\$	4,471.39
20.	Calo	culate your current monthly income	for the year. F	Follow these ste	eps:		
:	20a.	a. Copy line 19b				\$_	4,471.39
		Multiply by 12 (the number of months	s in a year).			2	c 12
:	20b.	o. The result is your current monthly inc	come for the yea	r for this part o	f the form	\$_	53,656.68
							40.040.00
:	20c.	c. Copy the median family income for y	our state and siz	ze of household	I from line 16c	\$_	46,242.00
	21	How do the lines compare?					
•		<u>_</u>	place othorwica	ordered by the	court, on the top of page 1 of this form, o	chack boy 3	The commitment
		period is 3 years. Go to Part 4.	riiess otrierwise	ordered by the	court, on the top of page 1 of this form, t	TIECK DOX 3,	rne communem
		Line 20b is more than or equal to commitment period is 5 years.		ss otherwise or	dered by the court, on the top of page 1 of	of this form, cl	heck box 4, The
Part 4	4:	Sign Below					
	By s	signing here, under penalty of perjury I	declare that the	e information or	this statement and in any attachments is	true and cor	rect.
X	/s/	/ Melissa Ann Stevens					
		elissa Ann Stevens gnature of Debtor 1					
	_	e May 30, 2017					
•		MM / DD / YYYY					

If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with t

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 42 of 54

			_		
Fill in th	is information to id	dentify your case:			
Debtor 1	Melissa A	nn Stevens			
Debtor 2	,				
	, if filing)				
United S	tates Bankruptcy Co	urt for the: Southern District of Ohio			
Case nu (if knowr			☐ Check	t if this is an amended	filing
Official F	form 122C-2				
		ulation of Your Disposable	Income		04/16
	t this form, you wil ment Period (Officia	I need your completed copy of <i>Chapter 13 Staten</i> I Form 122C-1).	nent of Your Current Monthly	Income and Calculation	n of
space is	needed, attach a se	te as possible. If two married people are filing toge parate sheet to this form, Include the line number and case number (if known).			
Part 1:	Calculate Your	Deductions from Your Income			
the qu	uestions in lines 6-	rvice (IRS) issues National and Local Standards 15. To find the IRS standards, go online using the available at the bankruptcy clerk's office.			
expen	ses if they are highe	nts set out in lines 6-15 regardless of your actual expression of the standards. Do not include any operating extra any amounts that you subtracted from your spouse	xpenses that you subtracted fro	om income in lines 5 and	
lf you	expenses differ fror	n month to month, enter the average expense.			
Note:	Line numbers 1-4 ar	e not used in this form. These numbers apply to info	rmation required by a similar for	rm used in chapter 7 case	es.
5. 1	The number of peop	ole used in determining your deductions from inc	ome		
l p		people who could be claimed as exemptions on your ny additional dependents whom you support. This nu in your household.		1	
Natio	nal Standards	You must use the IRS National Standards to an	swer the questions in lines 6-7.		
		other items: Using the number of people you entered dollar amount for food, clothing, and other items.	ed in line 5 and the IRS Nationa	al \$	639.00
t F	he dollar amount for people who are 65 or	h care allowance: Using the number of people you out-of-pocket health care. The number of people is solder-because older people have a higher IRS allowancent, you may deduct the additional amount on line	split into two categoriespeople wance for health car costs. If yo	who are under 65 and	

Official Form 22C-2

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 43 of 54

Debtor 1 Melissa Ann Stevens Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 49.00 Copy here=> \$ 49.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 49.00 Copy total here=> \$ 49.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 480.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 675.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment American Financial Resources, Inc. 1.034.00 \$ Сору Repeat this amount 1,034.00 1,034.00 9b. Total average monthly payment \$ here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and

Explain why:

affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 44 of 54

ebtor 1	Melissa Ann Stevens		(Case number (if known)		
11.	Local transportation expenses: Check the number of vehic	cles for which	you claim a	n ownershi	p or operating	expense.	
	□ 0. Go to line 14.						
	■ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for y						203.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.						
Ve	Describe Vehicle 1: 2011 Ford Explorer XLT	Γ 183000 mi	iles				
13a.	Ownership or leasing costs using IRS Local Standard			\$	485.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.						
	Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.						
	Name of each creditor for Vehicle 1	Average m	onthly				
	USAA Federal Savings Bank	\$	228.67				
				1		Repeat this	
	Total Average Monthly Payment	\$	228.67	Copy here =>	-\$228	amount on	
13c.	Net Vehicle 1 ownership or lease expense			,		Copy net	
	Subtract line 13b from line 13a. if this number is less than \$0,	, enter \$0		\$	256.33	Vehicle 1 expense here => \$	256.33
Ve	nicle 2 Describe Vehicle 2:					J	
13d.	Ownership or leasing costs using IRS Local Standard			\$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not includ	de costs for				
	Name of each creditor for Vehicle 2	Average m	onthly				
		\$					
				Сору		Donost this	
	Total average monthly payment	\$		here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense			,		Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0,	, enter \$0		.	0.00	Vehicle 2 expense here	0.00
				<u> </u>] =>	
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of v					the \$	0.00
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>	hat you believ					0.00

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 45 of 54

Debtor 1 Melissa Ann Stevens Case number (if known)

	er Necessary Expenses	In addition to the expense the following IRS categories		listed above	, you are allowed your monthly expenses	s for	
16.	self-employment taxes, soc	cial security taxes, and Med owever, if you expect to recommon the total monthly amou	dicare taxes. ceive a tax r	You may inc efund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,126.41
17.	Involuntary deductions: 7 contributions, union dues, a		ductions tha	at your job red	quires, such as retirement		
	Do not include amounts that	at are not required by your j	job, such as	voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payr	ments that you make for you or life insurance on your de	ur spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: administrative agency, such payments of the payments o	h as spousal or child suppo	ort payments		by the order of a court or You will list these obligations in line 35.	\$	0.00
20	Education: The total mont	· -				· —	
20.	as a condition for your jo	, , , ,	education	nat is entirel i	equireu.		
			ent child if no	public educ	ation is available for similar services.	\$	0.00
21	, , , ,	, , ,		•	sitting, daycare, nursery, and preschool.	· 	
۷1.	Do not include payments for			-	sitting, daybare, hursery, and prescriber.	\$	0.00
22.	that is required for the heal by a health savings account	th and welfare of you or you it. Include only the amount	ur depender that is more	nts and that is than the tota		Φ.	0.00
	Payments for health insura				y in line 25. you pay for telecommunication services	\$	0.00
	for you and your dependen phone service, to the exten income, if it is not reimburs	ts, such as pagers, call wai t necessary for your health ed by your employer. or basic home telephone, in	iting, caller in and welfare and content a	dentification, e or that of your	special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment	+\$	0.00
		protect of into o of official	FUIII 1220-	1, or any am	ount you previously deducted.		0.00
24.	Add all of the expenses a	•		•	ount you previously deducted.	\$	2,753.74
	•	llowed under the IRS exp	pense allow	ances. allowed by the	ne Means Test.		
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disabili	Illowed under the IRS exp These are additional Note: Do not include ity insurance, and health	deductions any expens	ances. allowed by the allowances count expen	ne Means Test.	\$	
Add	Add all of the expenses a Add lines 6 through 23. litional Expense Deduction Health insurance, disabilinsurance, disabilinsurance, disability insurance.	Illowed under the IRS exp These are additional Note: Do not include ity insurance, and health	deductions any expens	ances. allowed by the allowances count expen	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses at Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability unsurance, disability unsurance, dependents.	Illowed under the IRS exp These are additional Note: Do not include ity insurance, and health	deductions any expens savings accounts that a	ances. allowed by the allowances count expendance reasonab	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. iitional Expense Deduction Health insurance, disabili insurance, disabili insurance, disability insurance your dependents. Health insurance	Illowed under the IRS exp These are additional Note: Do not include ity insurance, and health	deductions any expens savings accounts that a	ances. allowed by the allowances count expendere reasonab	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance	Illowed under the IRS exp These are additional Note: Do not include ity insurance, and health	deductions any expens savings accounts that a	ances. allowed by the allowances count expensare reasonab 0.00 0.00	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	These are additional Note: Do not include ity insurance, and health ance, and health savings according total amount?	deductions any expens savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,753.74
Add	Add all of the expenses at Add lines 6 through 23. iitional Expense Deduction Health insurance, disability insurance, disability insurance, disability insurance, disability insurance, disability insurance. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do you	These are additional Note: Do not include ity insurance, and health ance, and health savings according total amount?	deductions any expens savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,753.74
Add	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	These are additional Note: Do not include ity insurance, and health ance, and health savings according total amount?	deductions any expens savings accounts that a	ances. allowed by the allowances count expense reasonab 0.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,753.74
Add 25.	Add all of the expenses a Add lines 6 through 23. iitional Expense Deduction Health insurance, disability insurance, disability insurance, disability insurance dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do you see the continued contributions continue to pay for the rease	These are additional Note: Do not include ity insurance, and health ance, and health savings according total amount? You actually spend? to the care of household conable and necessary care of your immediate family well.	deductions any expens savings accounts that a \$ + \$ or family me and suppoorho is unable	ances. allowed by the allowances count expenser reasonabe 0.00 0.00 0.00 0.00 0.00 embers. The rt of an elder et to pay for s	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, of the company of the c	\$	2,753.74
25.	Add all of the expenses a Add lines 6 through 23. itional Expense Deduction Health insurance, disability insurance, disability insurance disability insurance disability insurance. Disability insurance Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do you do not not not not not not not not not no	These are additional Note: Do not include ity insurance, and health ance, and health savings account of the care of household conable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably	deductions any expens savings accounts that a savings	ances. allowed by the allowances count expenser reasonabe 0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, of the company of the c	\$\$	0.00

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 46 of 54

btor 1	Melissa Ann Stevens	Cas	e number (if know	n) _				
	Additional home energy costs. Your homine 8.	ne energy costs are included in your insurance	and operatin	ıg exp	enses	on		
	f you believe that you have home energy on the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of home end of the fill in the excess amount of the fill in the excess and the fill in the excess amount of the excess amo	costs that are more than the home energy cosnergy costs	ts included in	exper	nses o	n line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must sary.	show that the	additio	onal		\$	0.00
5		dren who are younger than 18. The monthly ependent children who are younger than 18 ye						
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must on already accounted for in lines 6-23.	explain why th	ie amo	ount			
,	Subject to adjustment on 4/01/19, and ev	ery 3 years after that for cases begun on or af	ter the date of	f adjus	stmen	t.	\$	0.00
ŀ		the monthly amount by which your actual food g allowances in the IRS National Standards. T s in the IRS National Standards.						
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office		parate)			
`	You must show that the additional amount	claimed is reasonable and necessary.					\$	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga	e amount that you will continue to contribute in anization. 11 U.S.C. § 548(d)(3) and (4).	the form of c	ash o	r finar	icial		
I	Do not include any amount more than 15%	of your gross monthly income.					\$	0.00
	Add all of the additional expense deduc Add lines 25 through 31.	tions.					\$_	0.00
	ctions for Debt Payment							
	•	in management of the state of t			_			
	ans, and other secured by an interest	in property that you own, including home 33a through 33e.	mortgages, v	enici	е			
	o calculate the total average monthly paymeditor in the 60 months after you file for ba	ent, add all amounts that are contractually dunkruptcy. Then divide by 60.	e to each sec	ured				
	Mortgages on your home							age monthly
33a.	Copy line 9h here						paym \$	
osa.						=>	Ψ	1,034.00
	Loans on your first two vehicles						•	
33b.						=>	\$	228.67
33c.	Copy line 13e here					=>	\$	0.00
33d.	List other secured debts:							
Name	of each creditor for other secured debt	Identify property that secures the debt	ir	nclude	ayme taxes	3		
						-		
				J N	0			
	-NONE-			_			•	
	-NONE-						\$	
	-NONE-] Y	es		\$	
	-NONE-] Y	es		· —	
	-NONE-			□ Y	es o es		\$ \$	
	-NONE-			Yo	es o es		· —	
	-NONE-			Yo	es o es	+	· —	
	-NONE-			Yo	es o es o es	+ Copy	\$	

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 47 of 54

ebtor 1	Meli	ssa Ann Stevens			Case n	umber (if known)		
		debts that you listed in line property necessary for yo						
	l No.	Go to line 35.						
	Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property		, ,			
Nam	e of the	creditor	Identify property that se	cures the deb	t To	otal cure amount	Month amour	
Amo		Financial Resources,	6011 Baker Road A Athens County	thens, OH	Φ.	12,056.26		200.94
					\$ _		÷ 60 = +\$	
							Copy	
					Total \$	200.94	total here=> \$	200.94
	Yes.	Fill in the total amount of a ongoing priority claims, suc Total amount of all past-d	ch as those you listed in li	ne 19.	Φ.	26.965.00) ÷60 \$	449.42
		Total amount of all past-d			\$	26,965.00	<u> </u>	449.42
36. P ı	rojecte	d monthly Chapter 13 plan	payment		\$		_	
O th To	ffice of e Exec o find a l	nultiplier for your district as s the United States Courts (fo utive Office for United States ist of district multipliers that inclunstructions for this form. This list	r districts in Alabama and s Trustees (for all other di ides your district, go online u	North Caroli stricts).	na) or by X ecified in the			
A۱	verage	monthly administrative expe	nse			\$	Copy total here=> \$	
		of the deductions for debters 33e through 36.	t payment.				\$_	1,913.03
Total	Deduc	tions from Income						
38. A	dd all d	of the allowed deductions.						
6	expens	ne 24, All of the expenses all e allowances		\$	2,753.74			
(Copy lir	ne 32, All of the additional ex	pense deductions	. \$	0.00			
(Copy lir	ne 37, All of the deductions f	or debt payment	. +\$	1,913.03	¬		
7	Fotal de	eductions		\$	4.666.77	Copy total here=	> \$	4,666.77

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 48 of 54

ebtor 1 Melissa Ann Stevens			Case number (if known)							
Part 2:	Det	ermine You	r Disposable Income Under 11	U.S.C. § 13	25(b)(2)				
			ent monthly income from line Current Monthly Income and Ca				I <u>.</u>		\$	4,471.39
ch i dis red	40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.					:	\$0	.00		
em in 1	Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).						\$0	.00		
42. To t	2. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here					y line 38 here=	=>	\$4,666	.77	
exp the	penses eir expe	s and you ha enses. You r	al circumstances. If special circuve no reasonable alternative, demust give your case trustee a det ocumentation for the expenses.	scribe the sp	ecia	l circumstances ai	nd			
Descri	ibe the	special cir	cumstances			Amount of exp	ense	•		
						\$		_		
						\$		_		
						\$		_		
				Total	\$_	0.00		opy ere=> \$	0.00	
44. To	tal adj	ustments. /	Add lines 40 through 43.			=>	\$	4,666.77	Copy here=> -\$	4,666.77
45. Ca	lculat	e your mont	thly disposable income under (§ 1325(b)(2)	. Sub	otract line 44 from	line	39.	\$	-195.38
Part 3:	Cha	ange in Inco	ome or Expenses							
hav tim you	ve cha le your u filed	nged or are case will be your petition	or expenses. If the income in For virtually certain to change after the open, fill in the information below, check 122C-1 in the first column when the increase occurred, and	ne date you f w. For exam n, enter line	filed : ple, it 2 in t	your bankruptcy p f the wages report he second columi	etitic ted ir n, ex	on and during the ncreased after		
Form		Line	Reason for change			Date of change	е	Increase or decrease?	Amount o	of change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2 C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease	\$ \$ \$	

Case 2:17-bk-53430 Doc 1 Filed 05/30/17 Entered 05/30/17 12:10:17 Desc Main Document Page 49 of 54

Debtor 1	Melissa Ann Stevens	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the inform	nation on this statement and in any attachments is true and correct.
X	/s/ Melissa Ann Stevens	
	Melissa Ann Stevens Signature of Debtor 1	
-	May 30, 2017 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

- \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. American Financial Resources, Inc. Po Box 8068 3637 Sentara Way Virginia Beach, VA 23452

Cbcs Po Box 1085 Columbus, OH 43216

Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721

Internal Revenue Service Cincinnati, OH 45999-0149

Kim Hammond
Keith d. Weiner & Associates, Co., L.P.A
75 Public Square, 4th Floor
Cleveland, OH 44113

State of Ohio Department of Taxation P.O. Box 182131 Columbus, OH 43218-2131

USAA Federal Savings Bank Attn: Bankruptcy 9800 Fredericksburg Rd San Antonio, TX 78288

Verizon
P.O. Box 25505
Lehigh Valley, PA 18002-5505